	ZONA FOI 140		Resident Pers Deginning MMDDD			<b>ax Keturn</b> nding <u>[M M<sub>I</sub>D D</u> ]		66	20	004
YOUR FIRST NAME AND INITIAL					LAST NAME YOUR S			CIAL SECURI	ΓΥ NO.	
1				<u> </u>						
1 A JO	INT RETURN, SPOU	SE'S FIRST NAME AND INIT	IAL	LAST NAME	LAST NAME SPOUS			S SOCIAL SEC	URITY N	0.
	ENT HOME ADDRES	S - NUMBER AND STREET, F	RURAL ROUTE APT. NO	. DAYTIME PI	DAYTIME PHONE W/AREA CODE:			IMPORT	ANT	<b>1</b>
_	2							must enter		
==-	OWN OR POST OFF	ICE STATE ZII	CODE	1101112	THORE WATER		OR USE C		· · · · · · · · · · · · · · · · · · ·	
3				<u>/</u>						
<u>, 4</u>	Married fili	ng joint return								
Smill oration			lifying child or dependent:			  -				
6			ter spouse's Social Security	Number abo	ve	88				
₽ <del> </del>	Single	me here. ►				1	$\neg$			
		Age 65 or over (you a	nd/or spouse)			<del> </del>	80			
9	number Blind (you and/or spouse)					81 80 82 CHECK ONE if filing under				
9 10 11 11 11 11 11 11 11 11 11 11 11 11	claimed. Do Dependents. From page 2, line A2 - do not include self or spouse.						4 mc	nth extens	i: sion {	82D
	check mark.		d ancestors of your parents.				6 mo	nth extens		82F _
THI	S BOX MAY BE BLA	NK OR MAY CONTAIN A PRI	NTED BARCODE OF DATA FROM	YOUR RETURN	1	al adjusted gross income		12		
						ons to income (from page 2, li		13		$\dashv$
					1	nes 12 and 13		14		
						line not used.) actions. <i>Number from lin</i> e C27	'a: 16 <b>1</b>	16		
						na AGI. Line 14 minus line 16		17		
	18 18 ☐ ITEMIZED 18S ☐ STANDARD  19 Personal exemptions							18		
								19		
								20		
										$\perp$
								22		_
					23 Subtotal of tax. Add lines 21 and			23		_
	24					Clean Elections Fund Tax Redu 11□ YOURSELF 242□ SF		25		
26	24 Tookocci 242 Si Good							26		+
	7 Family income tax credit from worksheet on page 14 of instructions							27		
28 Credits from Arizona Form 301, line 58, or Forms 310, 321, 322, and 323 if Form 301 is not required								28		
29 Credit type. Enter form number of each credit claimed: 29 3 1 3 1 3 1 3 1 3 1										
30 Clean Elections Fund Tax Credit. From worksheet on page 16 of the instructions								30		
31 Balance of tax. Subtract lines 27, 28 and 30 from line 26. If the sum of lines 27, 28 and 30 is more than line 26, enter zero								31		
32 Arizona income tax withheld during 2004								32		_
33 Arizona estimated tax payments for 2004								33		-
	34 Amount paid with 2004 Arizona extension request (Form 204)							34 35		+
	6 Property Tax Credit from Form 140PTC							36		+
	17 Other refundable credits. Check box(es) and enter amount(s): 37A1 329 37A2 330							37		$\top$
	38 Total payments/refundable credits. Add lines 32 through 37							38		
39 TAX DUE. If line 31 is larger than line 38, subtract line 38 from line 31 and enter amount of tax due. Skip lines 40, 41 and 42							d 42	39		
40 OVERPAYMENT. If line 38 is larger than line 31, subtract line 31 from line 38 and enter amount of overpayment								40		$\perp$
	Amount of line 40 to be applied to 2005 estimated tax							41		_
							<del></del>	42		
43	- 50 Aid to Edi (entire refu	ucation 43	Arizona Wildlife  Domestic Violence Shelter		-+-	Neighbors Helping Neighbors Helping Neighbors		-		
	Special Oly		Political Giff			Neighbors [46]		1		
51					L 3□Renuh	lican				
	Check only one if making a political gift: 511 Democratic 512 Libertarian 513 Republican  Estimated payment penalty and MSA withdrawal penalty							52		
	B Check applicable boxes: 531□Annualized/Other 532□Farmer or Fisherman 533□Form 221 attached 534□MSA Penalty									
54	Total of lines 43, 44, 45, 46, 47, 48, 49, 50 and 52							54		$\perp$
55	5 REFUND. Subtract line 54 from line 42. If less than zero, enter amount owed on line 56							55		$\perp$
	ROUTING NU	MBER	ACCOUNT NUMBER			C Check	ring or			
EE	98 AMOUNT OWE	D Add lines 20 and 5	Make check psychle 45	Arizona Dan	artmont of	Saving Revenue; include SSN on p	gs	56		
130	ANICUITI CIVE	. Auu iiiles 35 aiiû 34	e-file /				ayınıtılı.	30		

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## PART A: Dependents and Qualifying Parents - do not list yourself or spouse If completing Part A, also complete Part C, lines C16 and/or C17 and C18. List children and other dependents. If more space is needed, attach a separate sheet. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 A2 Enter total number of persons listed in A1 here and on the front of this form, box 10. Also complete Part C below....... TOTAL Α2 A3 Enter the names of the dependents listed above who do not qualify as your dependent on your federal return: List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 5 of the instructions. NO. OF MONTHS LIVED FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP IN YOUR HOME IN 2004 Enter total number of persons listed in A4 here and on the front of this form, box 11. **A5** PART B: Additions to Income Non-Arizona municipal interest **B6 B7** Early withdrawal of Arizona Retirement System contributions not included on your federal return..... **B7 B8** Ordinary income portion of lump-sum distributions excluded on your federal return..... **B8 B9** Total federal depreciation..... **B9 B10** B10 Medical savings account (MSA) distributions. See page 6 of the instructions. **B11** B11 I.R.C. §179 expense in excess of allowable amount. See page 6 of the instructions..... Other additions to income. See instructions and attach your own schedule **B12** B13 Total. Add lines B6 through B12. Enter here and on the front of this form, line 13 ...... **B13** PART C: Subtractions from Income Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100 ..... C14 C15 C15 Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500 ..... C16 Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300..... **C16** Exemption: Qualifying parents and ancestors of your parents. Multiply the number in C17 box 11, page 1, by \$10,000..... C17 C18 Total exemptions: Add lines C14 through C17. If you have no other subtractions from income, skip lines C19 through C29 and enter the amount on line C18 on Form 140, Page 1, line 16..... C18 C19 Interest on U.S. obligations such as U.S. savings bonds and treasury bills C19 C20 Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer) ...... C20 C21 Arizona state lottery winnings included as income on your federal return (up to \$5,000 only)...... **C21** C22 C22 U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return ...... C23 C23 Recalculated Arizona depreciation **C24** C24 Certain wages of American Indians C25 Income tax refund from other states. See instructions C25 C26 Deposits and employer contributions into MSAs. See pages 9 and 10 of the instructions..... C26 C27 Construction of an energy efficient residence. See page 10 of the instructions. Enter number: C27a \_\_\_\_\_\_, then amount...... C27 C28 Other subtractions from income. See instructions and attach your own schedule ...... C28 Total: Add lines C18 through C28. Enter here and on the front of this form, line 16..... C29 Part D: Last Name(s) Used in Prior Years if different from name(s) used in current year D30 I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. PLEASE SIGN HERE YOUR SIGNATURE DATE SPOUSE'S SIGNATURE DATE PAID PREPARER'S SIGNATURE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED) PAID PREPARER'S TIN DΔTE PAID PREPARER'S ADDRESS If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016. If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.

ADOR 91-0011f (04)